

SPA 3: Dark

QTC

February.

August.

October.

**Service Planning Area 3
County of Los Angeles – Department of Mental Health
Quality Improvement Committee**

**Meeting Minutes
July 21, 2010**

Welcome and Introductions

All members introduced themselves and Seth welcomed and thanked everyone for coming.

Misty Allen
Gloria Santos
Makan Emadi
Leah Merjil
Stella Tam
Leslie Shrager
Julia Soler
Veronica McClendon
Paula Randle
Leah Dinsay
Lisha Singleton
Brenda Martinez
Jason Hatakeyama
Deborah Dagenis
Nancy Uberto
Michelle Hernandez
Windy Luna-Perez
Melody Taylor Stark
Gassia Ekizian
Lynda Villasenor
Kameelah Wilkerson
Sandra Bourdaa
Ana Beltran Bortolussi
Rhiannon DeCarlo
Julie McInnis
Peggy Daglian
Rosa Mancilla
Carrie Chung
Stephanie Sullivan
Representative from SPIRITT- illegible
Stephanie Harper
Elizabeth Owens
Adrine Bazikyan

Activity

The name game activity was completed in order for members to become more familiar with each other.

Minutes:

Minutes were reviewed and approved with one clarification:

Quality Assurance #2 – “Claiming day of discharge (for 24 hour facilities) cannot be done!”

Clarification

A 24.0 hour facility cannot claim on discharge, but Outpatient can bill on the day a client is discharged.

Presenter

Dr. Vandana Joshi, Head of Quality Improvement – LAC DMH

PSB collects and consolidates data to make it useful for providers and contractors. Emphasis: audits – narrow the gap between data and clinicians – review system wide data – motivate conversation and ongoing dialogue – daily QI activities – visit all service areas and incorporate questions and changes. A presentation of this product was done for Service Area 2 and the feedback was the system is “too large.”

The PSB can be found within the LAC DMH website. At the main page and left margin, scroll down to:

Administrative Tools for Providers

Quality Improvement & Training

Data Geographic Information Systems (GIS),

Or website: psbqi.dmh.lacounty.gov

Or email at: psbqi@dmh.lacounty.gov

This site posts QI Work Plan Report (published annually); QI Evaluation Reports, State and County Performance Outcomes; Quality Management which includes the QI Handbook. Additionally, demographics for SPA3 are included and SPA3 QIC minutes for 2009/10 is available; however, there is a two month delay in posting the minutes on the website because they are posted once approved. Agencies that would like a breakdown of their specific information need to contact DMH.

Data – Geographic Information Systems (GIS)

Provider Directory information should be coming from QI. Contain all service area provider information for fee and Outpatient services. This information is also utilized by the Access Center (DMH). There are a lot of clearly visible mistakes so the provider directory is updated quarterly. For changes to the directory, email to Seth Meyers, or send questions/comments to the above email address. Corrections must be sent in August as the next version of this directory will be coming out in September 2010.

QUALITY IMPROVEMENT

Melody Taylor Stark, Chair

New Change Provider form – client contact information. DMH is doing research on email field being on the form. Standards – a client has the right if they are requesting information be sent. Most agencies are not sending out information.

Cultural Competency: new policy; target date August 31, 2010 for policy.

Letter sent out to mental health director on June 14th. Institute will be sending out the surveys. Plans: 36K state wide broken into 3 age groups and feedback is important. Clients are endeavoring to keep information confidential. Once institute has data, will make sure HIPAA compliant and outcomes will be available next year. Institute for Social Research in Sacramento.

QUALITY ASSURANCE

Gassia Ekizian, Co-Chair

- State system review: draft report is completed, there are 2 reports
- System review – state reconsideration 1 item out of compliance; received supporting material.
- Chart review – QA staff has began reviewing the disallowances.
- Specialized Foster Care Audit – no new information
- EPSDT – no plan until state has a budget
- QA Review Directory operated : SA5 started July 13th
- PEI memo – PEI contract providers meeting this Friday. St. Annes – if you are doing EBP's at your agency, you are encouraged to attend. Get questions answered by people who specialize in the EBP's.

Question was asked if any body had signed up to use the Learning Net. Answer: (Misty) had difficulty. Trouble Shooting, contact: DonnaKay Davis (213) 251-6866.

Myths & Legends: Some agencies believe that EBP training will be done through Learning Net. Melody will check with the training director at 5 Acres for more clarification. Reported she went through the Help Desk and you don't know what prompt to use. Some agencies have been discouraged in sending / registering staff information. Seth will send an email clarifying what agencies are suppose to do.

PEI – training 7/23 at St. Anne's – going over documentation and billing. This announcement went to the Directors. Allowing 2 people per agency; Time 9 – 12; registration starts at 8am. Limited seating is expected. PEI guidelines will be coming soon. RSVP to: mhsapei@dmh.lacounty.gov (213) 351-5206. 155 N. Occidental Blvd. L.A.

EHR – finalizing a document to cross walk what is required by DMH in the EHR system. Different kinds of forms are required for directly operated and contractors. All will be outlined on this document. Timeline release is 2 months.

AUDITS

1. Fiscal Monitoring Review 2008/09 – Foothill Family Services
2. Hillside – end of August
3. Want PFI and all financial support information and well as clinical chart.
4. Auditing 30 days in advance and being provided a list the day before.
5. They stay the entire day.

Melody had a suggestion of adding trainings ongoing. Information sharing point of view, open forum; encouraging members to share any training attended or moving forward.

⇒ SPA4 – Child Adolescent Assessment, Adult Initial Assessment – Jennifer Eberle.
Jennifer is planning on doing training for each service area.

Adjournment

Meeting was adjourned

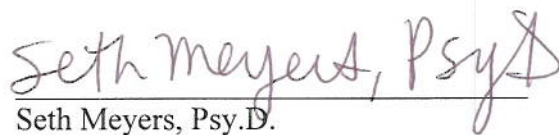
Minutes Recorded by: Elizabeth Owens, Tri-city Mental Health Center

Minutes Approved by: Seth Meyers, Quality Improvement Committee Co-Chair

Next Meeting

Date: Wednesday, August 18, 2010-08-09
Time: 9:30 – 11:30 a.m.
Location: ENKI, 3208 Rosemead Blvd., 2nd Floor
El Monte, CA 91731
Phone: (626) 227-7014

Approved:


Seth Meyers, Psy.D.


Date

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
Service Area 3
Quality Improvement Committee Meeting
March 17, 2010

WELCOME

Seth welcomed the group at 9:30 a.m. followed by self-introductions.

Alma	Misty Allen	Foothill Family	Gassia Ekizian
Almansor	Gloria Santos	Foothill Family	Daniel Ramirez
Arcadia MH	Catherine Weatherspoon		
	Max Emadi		
Heritage Clinic	Stella Tam		
Arcadia MH	Helena Ditko	Hillsides	Toni Aikins
Bienvenidos	Leah Merjil	Hathaway-Sycamores	Kameelah Wilkerson
Bridges Inc.	Joanne Buendia	Juvenile Court MHS	Nancy Gilbert
Bridges Inc.	R. Rhodes	Maryvale	Rhiannon De Carlo
Children's Bureau	Leslie Shrager	McKinley	Gaby Villasenor
Children's Bureau	Julia Soler	Pacific Clinics	Peggy Daglian
Crittenton	Paul Eberly	Prototypes	Padma Durvasula
David & Margaret	Paula Randle	Prototypes	Linda Pry
DMH	Lisha Singleton	PUSD School MH	Judy Law
DMH	Bertrand Levesque	Serenity	Carrie Chung
DMH	Tulip Mitchell	Social Model Recovery	Stephanie Sullivan
D'Veal	Conception Lugo	Spiritt	Dustin Schiada
ENKI	Michelle Hernandez	The Family Center	Stephanie Harper
Etti Lee	Windy Luna-Perez	Tri-City	Elizabeth Owens
Five Acres	Melody Taylor Stark	Trinity	Adrine Bazikyan

REVIEW OF THE MINUTES

The minutes for the January 20, 2010 QIC meeting were reviewed and approved.

Taking Minutes

- Seth had suggested that instead of electing someone every meeting to take the minutes for the meeting, that we come up with a system of ensuring that the minutes are taken. Seth gave providers two options: 1) alphabetically go down the list of providers (each provider taking minutes when it is the agency's turn or 2) electing a Secretary for SA 3 QIC, who will take the minutes each meeting. The Secretary will receive a letter from the SA 3 Chairs, informing the CEO of their agency on the Secretary's position for the SA 3 QIC. It was decided by providers that we will go with the first option. Alma Family Services was first on the list, thus they were the first to take the minutes for today's meeting. At the end of the

QIC meeting, Elizabeth Owens from Tri-City Mental Health volunteered to be the Secretary for SA 3 QIC and will begin taking the minutes at the next QIC meeting.

Remaining Issue from 2009

- Bertrand Levesque, former SA 3 QIC Chair, returned today to finish a remaining issue from 2009. He presented Gassia Ekizian from Foothill Family Service with a "Certificate of Appreciation" for her continue commitment to the SA 3 Quality Improvement Committee.

Speaker Ideas for 2010

- Seth asked providers what speakers they would like to have attend and present at the SA 3 QIC meetings this year. Here were someone of the ideas presented at today's meeting:
 - Auditor Controller – Annually or Bi-annually
 - Lilian Bando – to review EBP information
 - Julie Agojo – Specialized Foster Care
- If providers have any more suggestions, Seth asked that providers email him their suggestions.

Specialized Foster Care Chart Review

- Bertrand reports that DMH will be conducting an audit of Specialized Foster care cases. In May of last year the Board of Supervisors instructed DCFS and DMH to provide monthly updates regarding the implementation of a variety of Katie A. related initiatives. As part of this action, DMH was asked to assess the quality of mental health services being provided to Katie A. class members. The chart reviews will be done on a small sample of children who have been referred to DMH Specialized Foster Care co-located programs and subsequently linked to directly operated or contract mental health providers for treatment. The process will begin with providers in Service Planning Area (SPA) 7 and will then move to other SPA's over the balance of the year.
- These chart reviews will not be used to examine claiming practices or have any effect on reimbursement for services rendered. The results of the chart reviews will be aggregated so that individual clients and agencies will not be identified in the report to the Board.
- Bertrand encouraged all providers to take a look at the chart audit checklist that he emailed out on March 16, 2010, as this is the audit tool that the DMH will use when they come out to audit charts for the Specialized Foster Care audit.

WRAP Tier II

- Bertrand informed providers that are WRAP Tier II providers, that they need to bill to the right plan in IS (drop down). If the drop down has not been added to for the provider, then the provider needs to contact CIOB to have it added. Bertrand reports that in the reports he has seen thus far, no agencies are billing to the right plan in the IS.

Provider Directory

- Melody informed providers that there is a Provider list from CIOB, which providers can access online by reporting units. She also stated that there was another directory that providers can access from the cultural competency committee, which lists providers by languages spoken, etc.

- DMH is trying to make one directory of providers that will combine the information from the two directories, which should be available online soon. If an agency finds an error with the information provided on the directory, they are encouraged to contact their district chief.
- The Provider Directory can be accessed at: <http://psbqi.dmh.lacounty.gov/providerdirectory.htm>.

Patients Rights

- Melody reminded providers of the importance of completing their Request of Change of Provider Logs and faxing them to Patients Rights by the 10th of every month.

Learning Net Letter

- A memo was sent to all Executive Directors and DMH Contract Providers on March 3, 2010 regarding the Learning Net. The memo states that beginning May 1, 2010 contract provider staff must register via the Learning Net System (LNS) for training opportunities that are posted on the DMH Training Website. Contract providers will need to complete the Legal Entity/Provider Email Account Information Form by April 30, 2010, which will establish the email account in the LNS system.

CAEQRO

- The annual CAEQRO site review is April 12-15, 2010. They will be reviewing SA 4, 6, and 8 this year.

Cultural Competency

- During the recent Adult Systems Review audit by the State, there were 23 fields that the auditors looked, which 1 field was out of compliance.
- There were 3 disallowances in Access, 5 disallowances in Beneficiary Protection, and 1 disallowance in Authorization. Within the Access section, out of 5 calls that the auditors had, only 2 were logged.

PEI Meetings

- DMH will be conducting a series of kickoff meetings on the 8 EBP's and Promising Practices that are being implemented for the transformation of current DMH contract agency programs. The kickoff meetings will provide information on:
 - An overview of the EBP
 - Introduction to the DMH approved training and implementation protocols
 - Overview of the PEI plan requirements for each EBP
 - Performance-Based criteria and outcomes
 - Services to be provided and billing
- The kickoff meetings are intended for current DMH contractor executive leadership, program managers, and training coordinators whose agencies are transforming their programs to one or more of the 8 PEI EBP's in FY 09-10 or FY 10-11.
- The kickoff meetings will be on March 23, 25, 29, 30 and April 6.

System Review/Audit Findings

- The disallowance rate for the recent Adult Systems Audit was 35%. Out of 1,071 claims, 699 were allowed and 372 were disallowed. A handout was given to providers, which listed the preliminary findings from the audit.

New Face Sheet

- The Face Sheet has been revised and a Clinical Records Bulletin was sent out on 3-3-10. There are 3 fields that have been added: Children in the Home, Dependents in the Home and Insurance Information. Fields that are noted by an asterick have corresponding codes. The Primary Contact section has been renamed into two fields: SFPR name and Primary Contact name. Directly-Operated providers need to start using the new face sheet immediately. Contract providers have 6 months of the date of Bulletin to start using the face sheet.

Review of Bulletins Recently Sent

- **QA Bulletin 09-11 – New Services Logs.** The State is implementing modifications to the manner in which claims for clinical services are electronically coded and transmitted. Collectively, these changes are known as “Short-Doyle/Medi-Cal Phase II” (SD/MC II). Under SD/MC II, claims must be submitted to outsidepayer sources before being sent to Medi-Cal. For this reason, it is imperative that all information required by outside payer sources is captured on claims. Additionally, the State has requested information regarding clients with specific Medi-Cal Aid Codes, EPSDT funding, and Health Families. For Directly-Operated Programs and Contract Programs using the DMH Daily Service Log, the information contained on the Log has been updated to capture this additional information. **This Bulletin outlines the changes in information captured on a claim under SD/MC II and must be implemented upon the start of SD/MC II claiming.**
- **OMA Forms** – A Clinical Bulletin was sent out on 3-3-10, stating that the OMA (Outcome Measures Application) forms have been online in PDF format for Directly-Operated agencies.
- **New WRAP Procedure Code** - For Wraparound Providers, H2015 has routinely been used for stand alone plan development with the client and/or family during Child and Family Team (CFT) meetings. With the implementation of the changes to Procedure Code usage due to Short-Doyle/Medi-Cal Phase II (SD/MC II) outlined in QA Bulletin 09-10 Revised, the H2015 Procedure Code will only be used for individual and group rehab. **This Bulletin instructs Wraparound Providers to use a new code, H0032, for Plan Development services during the CFT in which H2015 was previously used.**

Electronic Signature Memo

- A memo was sent on March 1, 2010 to Executive Directors, stating that all Legal Entities that utilize electronic signatures need to take two actions. First, the Legal Entity must complete the Legal Entity Electronic Certification Agreement. Secondly, all staff/individuals that use an electronic signature need to sign an Electronic Signature Agreement for the terms of use of their electronic signature. The Legal Entity Signature Agreement for each user shall be maintained by the Legal Entity in either electronic or paper version.

Audits

- **Heritage Clinic** – Auditor Controller
- **Five Acres** – Medi-Cal Re-certification
- **D’Veal** – WRAP audit
- **Arcadia Mental Health** – Medi-Cal Re-certification

- **Arcadia Mental Health** – FSP HIPAA audit – was given 24 hour notice. Seth is going to find out more information on what this HIPAA audit entails.

ADJOURNMENT: Seth thanked everyone for attending and adjourned the meeting.

Minutes Recorded by: Misty Allen, Alma Family Services

Minutes Approved by: Seth Meyers, Quality Improvement Committee Co-Chair

NEXT MEETING: The next meeting will be on Wednesday, April 21, 2010 (9:30 a.m.- 11:30 a.m.) at ENKI, 3208 Rosemead Blvd, 2nd Floor, El Monte, CA 91731 (626) 227-7014

Approved by:

Seth Meyers, Psy.D. 5.6.10
Seth Meyers, Psy.D. Date
QIC Chair, SPA 3